

STATE OF NEW HAMPSHIRE
PART TIME HMO AND POS MEDICAL NEPBA LOCAL 040, 045, 260, 265, and 270 EMPLOYEES
STATE & EMPLOYEE CONTRIBUTION CHART
WITH \$32/\$42/\$52 EE CONTRIBUTIONS
EFFECTIVE 1/1/2016

The employee's share of Point of Service and HMO plans are the 26 PP respective working rate, less the employee share from the CBA (\$32/\$42/\$52), times the % of participation, then the employee share from the CBA (\$32/\$42/\$52) added back.

HMO					30 HOURS TO 31.5 HOURS
HMO EE CONTRIBUTION	HMO ER CONTRIBUTION		W RATE		
26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$87.15	\$2,265.90	\$220.62	\$5,736.12	\$8,002.02
HL-2	\$156.70	\$4,074.20	\$458.81	\$11,929.06	\$16,003.26
HL-3	\$238.56	\$6,202.56	\$746.26	\$19,402.76	\$25,605.32

POS					30 HOURS TO 31.5 HOURS
POS EE CONTRIBUTION	POS ER CONTRIBUTION		W RATE		
26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$100.76	\$2,619.76	\$275.02	\$7,150.52	\$9,770.28
HL-2	\$183.91	\$4,781.66	\$567.63	\$14,758.38	\$19,540.04
HL-3	\$282.09	\$7,334.34	\$920.38	\$23,929.88	\$31,264.22

HMO					32 HOURS TO 34.5 HOURS
HMO EE CONTRIBUTION	HMO ER CONTRIBUTION		W RATE		
26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$73.37	\$1,907.62	\$234.40	\$6,094.40	\$8,002.02
HL-2	\$128.03	\$3,328.78	\$487.48	\$12,674.48	\$16,003.26
HL-3	\$191.92	\$4,989.92	\$792.90	\$20,615.40	\$25,605.32

POS					32 HOURS TO 34.5 HOURS
POS EE CONTRIBUTION	POS ER CONTRIBUTION		W RATE		
26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$83.57	\$2,172.82	\$292.21	\$7,597.46	\$9,770.28
HL-2	\$148.43	\$3,859.18	\$603.11	\$15,680.86	\$19,540.04
HL-3	\$224.57	\$5,838.82	\$977.90	\$25,425.40	\$31,264.22

HMO					35 HOURS TO 37 HOURS
HMO EE CONTRIBUTION	HMO ER CONTRIBUTION		W RATE		
26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$51.30	\$1,333.80	\$256.47	\$6,668.22	\$8,002.02
HL-2	\$82.15	\$2,135.90	\$533.36	\$13,867.36	\$16,003.26
HL-3	\$117.30	\$3,049.80	\$867.52	\$22,555.52	\$25,605.32

POS					35 HOURS TO 37 HOURS
POS EE CONTRIBUTION	POS ER CONTRIBUTION		W RATE		
26PP	ANNUAL	26PP	ANNUAL	TOTAL	
HL-1	\$56.06	\$1,457.56	\$319.72	\$8,312.72	\$9,770.28
HL-2	\$91.67	\$2,383.42	\$659.87	\$17,156.62	\$19,540.04
HL-3	\$132.53	\$3,445.78	\$1,069.94	\$27,818.44	\$31,264.22

FT EMPLOYEE CONTRIBUTION	
	26 PP
HL-1: 1 PERSON	\$ 32.00
HL-2: 2 PERSON	\$ 42.00
HL-3: FAMILY	\$ 52.00

MONTHLY WORKING RATES			
	POS	HMO	
HL-1: 1 PERSON	\$ 814.18	\$ 666.84	
HL-2: 2 PERSON	\$ 1,628.33	\$ 1,333.61	
HL-3: FAMILY	\$ 2,605.36	\$ 2,133.77	

POS 26 PP %					
HL-1: 1 PERSON	375.78	20%	68.76	32.00	100.76
HL-2: 2 PERSON	751.54	20%	141.91	42.00	183.91
HL-3: FAMILY	1,202.47	20%	230.09	52.00	282.09

HMO 26 PP %					
HL-1: 1 PERSON	307.77	20%	55.15	32.00	87.15
HL-2: 2 PERSON	615.51	20%	114.70	42.00	156.70
HL-3: FAMILY	984.82	20%	186.56	52.00	238.56

POINT OF SERVICE (POS)							
COMPANY-STATE SHARE (3006)				EMPLOYEE SHARE (3004)			
WEEKLY HRS RANGE	%	TYPE	PLAN	AMT PER 26 PP	%	TYPE	AMT PER 26 PP
30.0	80%	HL	1	275.02	20%	HL	100.76
		HL	2	567.63		HL	183.91
(30 to 31.5)		HL	3	920.38		HL	282.09

HEALTH MAINTENANCE ORGANIZATION (HMO)							
COMPANY-STATE SHARE (3003)				EMPLOYEE SHARE (3001)			
WEEKLY HRS RANGE	%	TYPE	PLAN	AMT PER 26 PP	%	TYPE	AMT PER 26 PP
30.0	80%	HL	1	220.62	20%	HL	87.15
		HL	2	458.81		HL	156.70
		HL	3	746.26		HL	238.56

32.0	85%	HL	1	292.21	15%	HL	83.57
		HL	2	603.11		HL	148.43
(32 to 34.5)		HL	3	977.90		HL	224.57

32.0	85%	HL	1	234.40	15%	HL	73.37
		HL	2	487.48		HL	128.03
		HL	3	792.90		HL	191.92

35.0	93%	HL	1	319.72	7%	HL	56.06
		HL	2	659.87		HL	91.67
(35 to 37)		HL	3	1069.94		HL	132.53

35.0	93%	HL	1	256.47	7%	HL	51.30
		HL	2	533.36		HL	82.15
		HL	3	867.52		HL	117.30

FULL TIME	100%	HL	1	343.78	0%	HL	32.00
		HL	2	709.54		HL	42.00
(37.5 to >)		HL	3	1150.47		HL	52.00

FULL TIME	100%	HL	1	275.77	0%	HL	32.00
		HL	2	573.51		HL	42.00
		HL	3	932.82		HL	52.00